

01-12-0392

Entered -08/31/99 - sb
CL 99L0544 - GWENDOLYN BURNS

CLAIM OF: BETTY W. HIEBER
2494 Sharondale Drive, NE
Atlanta, Georgia

For property damage alleged to have been sustained due to a flood
which occurred as a result of the creek overflowing on July 6, 1999 at
2495 Sharondale Drive.

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Employee

THIS ADVERSED REPORT IS APPROVED

BY: Rosalind Rubens Newell
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

NATURE C
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Furthermore, the
on the day of the
O.C.G.A. §36-33-1

INVESTIGATION:

Statements: City emp
Pictures _____ Diagr.
Traffic citations issued: C
Citation disposition: City

BASIS OF RECOMMEND

Function: Governmental _____
Improper Notice _____ Mo.
City not involved _____
Repair/replacement by Ins. Co. _____
Claimant Negligent _____ C

RECOMMENDATION:

Pay \$

COUNCIL OF THE CITY OF ATLANTA
MUNICIPAL CLERK
City Hall
55 Trinity Avenue, S.W.
Atlanta, Georgia 30335

RE: CLAIM FOR DAMAGES

Today's Date: Aug. 19, 1999

BURNS
08/27/99

Dear Municipal Clerk:

ENTERED - 8-31-99 -SB
99L0544 - GWEN BURNS

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 5,000.00 property and/or \$ _____ bodily injury for which I contend the City is liable.

1. Date of incident: July 16, 1999 (month/day/year) 2. Time of Incident: _____ 3. Police called: _____ ☒ Yes ☐ No

4. Location of incident (including street address): 2495 SHARONDALE DR.

5. Name of your insurance company: STATE FARM - HOME INS Policy No. 11-B8-2859-2

6. State what and how incident occurred: Flood. 3' WATER IN BASEMENT.
GLASS SLIDING DOOR BROKEN - BILL ENCHUSED.
SOFA, ANTIQUE BENCH. CLEAN UP. 400.00
LAWN MOWER, FURNACE & AIR CONDITION - ~~SEPARATE~~ SERVICED.

7. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).

Your vehicle: _____
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: _____
(Make) (City Driver's Name) (Department/Bureau)

9. Witness: _____
(Name) (Address) (Telephone Number)

10. The acknowledgement of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).

11. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Betty W. Hieber
Signature of Claimant

Betty W. Hieber
(Print Claimant's Name)

2495 SHARONDALE DR. N.E.
(Address)

ATLANTA, GA.
(City, State and Zip Code)

404-237-5474
(Work Number) (Home Number)

01-R -0392

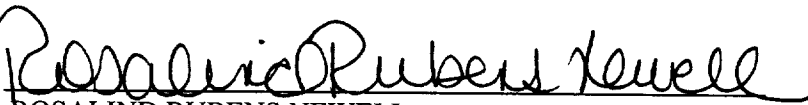
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01-*R*-0392

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which occurred as a result of the creek overflowing on July 6, 1999 at
2495 Sharondale Drive.

THIS ADVERSED REPORT IS APPROVED

BY: 
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 99L0544

Date: February 2, 2001

Claimant /Victim BETTY W. HIEBER

BY: (Atty) (Ins. Co.) _____

Address: 2495 Sharondale Drive, Atlanta, Georgia 30305

Subrogation: _____ Claim for Property damage \$ 5,000.00 Bodily Injury \$ _____

Date of Notice: 8/27/99 Method: Written, Proper X Improper _____

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 7/6/99 Place: 2495 Sharondale Drive, NE

Department PUBLIC WORKS Division SEWER OPERATIONS

Employee involved _____ Disciplinary Action: _____

NATURE OF CLAIM: Claimant sustained property damage when the basement of her home was flooded as a result of the creek overflowing behind her home on the above-listed date. An investigation determined that the City did not have any complaints of debris or fallen trees in the creek until after the date of claimant's incident. Furthermore, the City experienced an unusually large amount of rainfall during a severe rain storm, an "act of God", on the day of the incident which caused the creek to overflow. The City is immune from liability as set forth in O.C.G.A. §36-33-1.

INVESTIGATION:

Statements: City employee X Claimant _____ Others _____ Written X Oral _____

Pictures _____ Diagrams _____ Reports: Police _____ Dept Report X Other _____

Traffic citations issued: City Driver _____ Claimant Driver _____

Citation disposition: City Driver _____ Claimant Driver _____

BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial _____

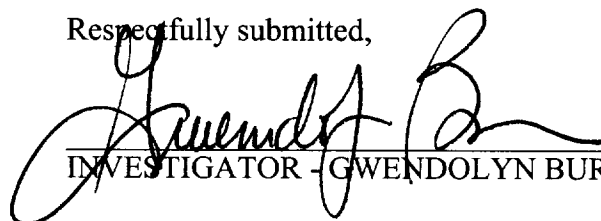
Improper Notice _____ More than Six Months _____ Other X Damages reasonable _____

City not involved _____ Offer rejected _____ Compromise settlement _____

Repair/replacement by Ins. Co. _____ Repair/replacement by City Forces _____

Claimant Negligent _____ City Negligent _____ Joint _____ Claim Abandoned _____

Respectfully submitted,


INVESTIGATOR - GWENDOLYN BURNS

RECOMMENDATION:

Pay \$ _____ Adverse X Account charged: 1A01 _____ 2J01 _____ 2H01 _____

Claims Manager:  Concur/date 03-01-01

Committee Action: _____ Council Action _____

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(month/day/year) Yes No
4. Location of incident (including street address): 2495 SHARONDALE DR.
5. Name of your insurance company: STATE FARM - HOME INS Policy No. 11-B8-2859-2
6. State what and how incident occurred: Flood. 3' WATER IN BASEMENT.
GLASS SLIDING DOOR BROKEN - BILL ENCHUSED.
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Betty W. HIEBER
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ATLANTA, GA.
(City, State and Zip Code)

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